

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

10495-00805

5/25/95

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>5-12-95</u>	2 Serial/Patent # <u>08-424,430</u>	3 Please refund the following fee(s):	4 PAPER NUMBER								
		Filing	1								
		Amendment									
		Extension of Time									
		Notice of Appeal/Appeal									
		Petition									
		Issue									
		Cert of Correction/Terminal Disc.									
		Maintenance									
		Assignment									
		Other									
<u>ENMEI TOSHIHARU</u> <u>13-21 MORIYAMA 1-CHOME</u> <u>MORIYAMA-KU</u> <u>OSAKA 460 JAPAN</u>		7 TOTAL AMOUNT OF REFUND	\$ <u>490 00</u>								
10 REASON: <input type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		8 TO BE REFUNDED BY:									
		<input type="checkbox"/> Treasury Check <input type="checkbox"/> Credit Deposit A/C #: <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>9</td> <td>.</td> <td>.</td> <td>--</td> <td>.</td> <td>.</td> <td>.</td> <td>.</td> </tr> </table>		9	.	.	--
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11 REFUND REQUESTED BY: TYPED/PRINTED NAME: <u>Anita Johnson</u> TITLE: <u>Paralegal</u> SIGNATURE: <u>Anita Johnson</u> PHONE: <u>305-3661</u> OFFICE: <u>PCT DO-EO</u> **** THIS SPACE RESERVED FOR FINANCE USE ONLY **** APPROVED: <u>Bill Phillips</u> DATE: <u>5-24-95</u>											

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

ID	MCH	TPE	NAME OR ACCOUNT	C-NBR	MLEDTE	CURDTE	F-C	\$	AMOUNT
C	180	1	08424430	00069	950524	950524	971		425.00-
C	180	1	08424430	00069	950524	950524	965		532.00-
C	180	1	08424430	00069	950524	950524	967		110.00-
C	180	1	08424430	00072	950524	950524	971		425.00
C	180	1	08424430	00072	950524	950524	965		532.00
C	180	1	08424430	00072	950524	950524	967		110.00

NO MORE TRANSACTIONS

END OF YOUR QUERY